

Unclaimed Property Informal Audit Review Conference Request

Mail to:

OFFICE OF THE STATE CONTROLLER
Attention: Legal Office
P.O. Box 942850
Sacramento, CA 94250-5873

Holder Name: _____

Address: _____

Hearing Participant: _____ Title : _____

Hearing Participant: _____ Title : _____

Hearing Participant: _____ Title : _____

Hearing Participant: _____ Title : _____

Appeal Amount: \$ _____ Years Covered: _____

Appeal Issue: _____

(continue on separate page if necessary)

Request Tentative Dates for Informal Conference:

Location: _____

Date: _____ Date: _____ Date: _____

Applicant: _____ Phone #: _____ Date: _____

*** Backup documents must be submitted with this Request ***